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FACSIMILE TRANSMISSION COVER SHEET

Date: July 31, 2006

To: United States Patent and Trademark Office
Examiner: Opsasnick, Michael N.; Art Unit: 2626

Fax: (571) 273-8300

Re: **Application Serial No.: 10/799,460**
Filing Date: 3/11/2004; First-Named Inventor: Gao
Attorney Docket No.: 0160115

From: Farjami & Farjami LLP

Number of pages including the cover sheet: 16

Message:

Enclosed please find the Amendment and Response to Non-Final Office Action dated June 8, 2006.

Thank you.

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Attorney Docket No.: 0160115

AMENDMENT COVER SHEET

IN RE APPLICATION OF: Gao, et al.

SERIAL NO.: 10/799,460 FILED: 3/11/2004

FOR: Adaptive Correlation Window for Open-Loop Pitch

HONORABLE COMMISSIONER FOR PATENTS
P.O. Box 1450, Alexandria, VA 22313-1450

Sir/Madam:

Transmitted herewith is a paper in the above-identified application. Any necessary extension of time period set for this paper is hereby requested.

☒ No additional fee is required.

☐ The fee has been calculated as shown below:

☐ EXTENSION FEE

	RATE Non-Small Entity	RATE Small-Entity	FEE
FIRST MONTH AFTER TIME PERIOD SET	120.00	60.00	\$
SECOND MONTH AFTER TIME PERIOD SET	450.00	225.00	\$
THIRD MONTH AFTER TIME PERIOD SET	1,020.00	510.00	\$
FOURTH MONTH AFTER TIME PERIOD SET	1,590.00	795.00	\$

☐ TOTAL EXTENSION FEE \$ 0.00

☐ FEE FOR EXTRA CLAIMS added by Amendment in this response:

	Column 1 Number of Claims after Amendment	Column 2 Number Previously Paid for	Column 3 Number of Extra Claims	RATE Non-Small Entity	RATE Small Entity	FEE
TOTAL CLAIMS	12	MINUS **20	* = 0	x 50	x 25	\$
INDEPENDENT	3	MINUS ***3	* = 0	x 200	x 100	\$
First presentation of multiple dependent claim				+ 360	+ 180	\$

TOTAL FEE FOR EXTRA CLAIMS \$ 0.00

- * If the entry in Column 1 is less than the entry of Column 2, write "0" in Column 3.
 ** If the number of Total Claims previously paid for is less than 20, write "20" in this space.
 *** If the number of Independent Claims previously paid for is less than 3, write "3" in this space.

03M0012/US

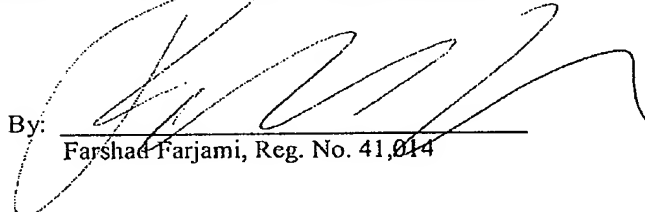
Attorney Docket No.: 0160115

- ☐ Enclosed is the total fee of \$ _____ (Payment by Credit Card, Form PTO-2038 Enclosed).
- ☐ Please charge Deposit Account No. 50-1867 in the amount of \$ _____
- ☒ The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication, or credit any overpayment to Deposit Account No. 50-1867. A duplicate copy of this sheet is enclosed.

Date:

7/31/06

By:


Farshad Farjami, Reg. No. 41,014CERTIFICATE OF FACSIMILE TRANSMISSION

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Date:

7/31/06

Signature

Christina L. Carter

Name of Person Performing Facsimile Transmission

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03M0012/US

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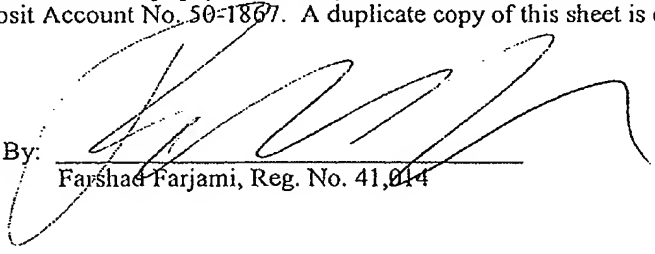
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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In re Application of: Yang Gao

Art Unit: 2626

Serial No.: 10/799,460

Examiner: Opsasnick, Michael N.

Filed: March 11, 2004

For: ADAPTIVE CORRELATION WINDOW
FOR OPEN-LOOP PITCH

AMENDMENT AND RESPONSE TO NON-FINAL OFFICE ACTION

Honorable Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir/Madam:

This Amendment and Response is submitted in response to the *Non-Final* Office Action, dated June 8, 2006, in the above-referenced patent application. Please enter and consider the following amendments and remarks.